

United States Bankruptcy Court for the Southern District of New York




WITHDRAWAL OF CLAIM

Debtor Name and Case Number:	Lehman Brothers Holdings Inc.
Creditor Name and Address:	Aberdeen Global II -Global Sovereign Opportunities Bond Fund (formerly Aberdeen Global II - Emerging Markets Fixed Income Alpha Fund), 2b, rue Albert Borschette, L-1246, Luxembourg, Grand Duchy of Luxembourg
Court Claim Number (if known):	16654
Date Claim Filed:	18 September 2009
Total Amount of Claim Filed:	\$2,672,001.00

I, the undersigned, am the above-referenced creditor, or an authorized signatory for the above-referenced creditor. I hereby withdraw the above-referenced claim and authorize the Clerk of this Court, or their duly appointed Claims Agent, to reflect this withdrawal on the official claims register for the above-referenced Debtor.

Dated: 15/8/2013


Print Name: CHARLIE MACRAE
Title (if applicable): DIRECTOR

DEFINITIONS

Debtor

The person, corporation, or other entity that has filed a bankruptcy case is called the debtor.

Creditor

A creditor is any person, corporation, or other entity to which the debtor owed a debt.

Proof of Claim

A form filed with the clerk of the bankruptcy court where the bankruptcy case was filed, to tell the bankruptcy court how much the debtor owed a creditor (the amount of the creditor's claim).

ITEMS TO BE COMPLETED ON THIS WITHDRAWAL OF CLAIM

Court, Name of Debtor and Case Number:

Fill in the name of the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the name of the debtor in the bankruptcy case, and the bankruptcy case number. If you received a notice of the case from the court, all of this information is near the top of the notice.

Information about Creditor:

Complete the section giving the name and address of the creditor that was listed on the previously filed Proof of Claim form.

Information identifying the Claim that is to be withdrawn:

Complete the section giving the court claim number, date claim was filed and total amount of claim filed to help identify the claim that is to be withdrawn.

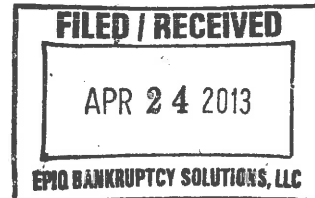
Sign and print the name and title, if any, of the creditor or other person authorized to file this withdrawal of claim (attach copy of power of attorney, if any).

This form must be filed with the clerk of the bankruptcy court where the bankruptcy case was filed or, if applicable, with their duly appointed Claims Agent as per any procedure approved by the court in the above-referenced bankruptcy proceeding.



Epiq Bankruptcy Solutions, LLC

c/o: Lehman Brothers Holdings Claims Processing
Attn: Gregory Winter
757 Third Avenue, 3rd Floor
New York, NY 10017



23 April 2013

Dear Greg,

Lehman Brothers Chapter 11 – Claims Withdrawal

Further to our email correspondence dated 15 February 2013, we would be grateful if you could file the attached claim withdrawals in respect of claim numbers 16649, 16651, 16653, 16654 and 16648.

Please do let me know if you require anything further.

Yours faithfully

BRETT BUNTING

Head of Legal – Client Take-on and Events

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the purpose of marketing the Aberdeen Group's collective investment schemes, closed end fund savings plans, VCTs, private equity and portfolio management services.

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4 HOURS

LIST



Consignee
EPIQ BANKRUPTCY SOLUTIONS LLC
C/O LEHMAN BROTHERS HOLDINGS C
575 THIRD AVENUE 3RD FLOOR
NEW YORK 10017
NY USA

Contact
GREGORY WINTER

Telephone

FILED / RECEIVED

APR 24 2013

EPIQ SYSTEMS

Consignment Note

1868468



1 of 1 MARK 3 USA



24 HOURS A DAY
TEL: UK +44 (0) 1753 685509
SHIPPER TO COMPLETE ALL GREY SHADED AREAS

TRACKING NUMBER
1868468

SHIPPER'S ACCOUNT NO		SHIPPER'S REFERENCE		ORIGIN	AIRBILL NUMBER	DESTINATION
A602		BD-LEHMAN		USA		USA
FROM (SHIPPER)				TO (CONSIGNEE)		
ARKDEEN ASSET MANAGEMENT PLC BOX BELLS HOUSE 1 BREAD STREET LONDON EC4M 9UH UK SENT BY (NAME/DEPT): Facilities London TEL/MOB: 0207 403 6500				EPIQ BANKRUPTCY SOLUTIONS LLC C/O LEHMAN BROTHERS HOLDINGS CL 575 THIRD AVENUE 3RD FLOOR NEW YORK 10017 NY USA ATTN OF (NAME/DEPT): GREGORY WINTER TEL/MOB:		
Nº OF PIECES	FULL DESCRIPTION OF CONTENTS				WEIGHT	DECLARED VALUE
1	DIMS X X CM / INS DIMS X X CM / INS SPECIAL INSTRUCTIONS					
SHIPPER'S SIGNATURE					INSURANCE YES / NO	
RECEIVED BY AmWorld					INSURANCE VALUE	
A & CONDITION					TIME	
					DATE	
					TOTAL	



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